KCZ,

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

09777/078

CLAIMS AS FILED - PART I (Column 1)					l (Colui	SMALL ENTITY TYPE TYPE			ITITY	OTHER THAN OR SMALL ENTITY		
TC	OTAL CLAIMS							RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TC	TAL CHARGEA	BLE CLAIMS	minus 20=		*			X\$ 9=		OR	X\$18=	
INE	DEPENDENT CL	AIMS	minus 3 =		*			X42=	X	OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	,
* If the difference in column 1 is less than zero, enter					"0" in c	olumn 2		TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART (Column 1) (Colum						(Column 3)		SMALL E	NTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* 20	Minus	** 2	<u>3 </u>	=	╽╽	X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	*** J	CLAIM	=		X42=		OR	X84=	
L	1		<u> </u>		00 1111	 	'	+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	Control of the Contro	(Column 1)		(Colu		(Column 3)						·
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* 24	Minus	** 2	3	= /		X\$ 9=		OR	X\$18=	1XQ
AME	Independent	* NTATION/OF MI	Minus	***	3 CLAIM	=		X42=		OR	X84=	-10
<u> </u>	THOTTREE	TATION OF WA	JETH LE DEI	LIVOLIVI]	+140=		OR	+280=	
							-	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	1800
	110 A 2 TO 1 TO	(Column 1)	A	(Colur		(Column 3)			•			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=-	1	X42=			X84=	
4	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDEN	CLAIM		┧┟			OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								,				
** If the entry in column 1 is less than the entry in column 2, write 0 in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

PATENT APPLICATION FEE	DETERMINATION RECORD
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Effective October 1, 2000

Application or Docket Number

P/80-1

CLAIMS AS FILED - PART I							CMALLER	OTHER THAN			
(Column 1) (Column 2)						SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			24		24.0		RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	· 710.00
TO	TAL CHARGEAE	BLE CLAIMS	→ 4 minus 20=		• 4		X\$ 9=	36	OR	X\$18=	
INDEPENDENT CLAIMS			\ minus 3 = *			5	X40=		OR	X80=	
MU	LTIPLE DEPEN	RESENT			+135=		OR	+270=			
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	TOTAL	391	OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)					SMALL ENTITY OR			OTHER THAN SMALL ENTITY			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI		PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	. 23	Minus	** 5	4	=	X\$ 9=		OR	X\$18=	
AMEI	Independent	* /	Minus		<u>7 () </u>	=	X40=		OR	X80=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	I CLAIM		+135=		OR	+270=	
							TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)	ABBITATE				
ENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=	X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	T CLAIM		+135=		OR	+270=	
							TOTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Coli	ımn 2)	(Column 3)	ADDIT. FEE		•	AUDII. FEE	
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIG NU! PREV	HEST MBER HOUSLY D FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
POM	Total		Minus	**		=	X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	*	Minus	***		=	X40=		OR	X80=	
الم	FIRST PRESENTATION OF MULTIPLE DEPEN				IT CLAIN	1	+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.						TOTAL	 -	OR	TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											